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Al-Azhar University
Faculty of Medicine
Dermatology & Andrology Department

Diploma Examination
STDs & Andrology
November 2015

All questions should be answered (Time allowed: 3 hours):

1- MCQ (To be answered in a separated sheet) (30 marks)

2- A 37 years old man presented with 2ry infertility for 6 years. Clinical examination showed bilateral epididymal tail nodules and semen analysis was azoospermia with normal volume and leukocytospermia. There was history of recurrent urinary tract infections:

- A- What is your diagnosis? (2 marks)
B- Mention his hormonal profile. (4 marks)
C- How can you treat this patient? (4 marks)

3- A 25 years old man suffered from mild dysuria and mucoid urethral discharge. There is history of extramarital intercourse 3 weeks ago. Gram stained smear was negative:

- A- What is your diagnosis? (2 marks)
B- What are the possible causes? (4 marks)
C- How can you treat such patient? (4 marks)

4- A single 23 years old male complaining occasional urethral discharge that may follow urination, defecation and sometimes on straining. He denies any sexual relation, urethral swab for Gram stain for gonococci was -ve:

- A- What is your diagnosis? (5 marks)
B- What is the cause and management? (5 marks)

5- Differentiate between:

- A- Epididymo-orchitis and testicular torsion.
B- Psychogenic and organic erectile dysfunction.
C- Candidal and Trichomonas Vaginal discharge.
D- Condylomata lata and condylomata acuminata.

(each one 5 marks)

6- Give a short account on:

- A- Blood supply and lymphatic drainage of testis.
B- Pediatric vaginal discharge.
C- Oral manifestations of syphilis.
D- Ocular manifestations of HIV/AIDS.

(each one 5 marks)

Good Luck

Answer the following questions :-

30 Marks

1- MCQ

**2- A 42 years old man presented with 2ry infertility for 7 years.
Clinical examination showed bilateral epididymal tail nodules and semen
analysis was azoospermia with normal volume and leukocytospermia.**

There was history of recurrent urinary tract infections:

- A) What is your diagnosis? (2 mark)
- B) Expect his hormonal profile? (4 mark)
- C) How can you treat this patient? (4 mark)

**3- A 33 years old man suffered from mild dysuria and mucoid urethral discharge.
There is history of extramarital intercourse 3 weeks ago. Gram stained smear**

Was negative:

- A) What is your diagnosis? (2 mark)
- B) What are the possible causes? (4 mark)
- C) How can you treat such patient? (4 mark)

4-Discuss late manifestation of congenital syphilis.

(10 mark)

Azhar University

Faculty of Medicine

Dermatology and Venereology Department

Diploma degree (Andrology and STDS)

Time allowed: 3 hours

11-11-2014

ALL QUESTIONS SHOULD BE ANSWERED

(30 marks)

1) MCQ: To be answered in a separate paper

2) Male patient 28 years old presented by single painless penile ulcer since 10 days. The patient gave history of extra marital sexual relation 45 days *chance* ago. On examination the ulcer has slopping edge and indurated base with enlarged, discrete, firm, painless bilateral inguinal lymph nodes.

a) What is your probable clinical diagnosis? *genital* (2 marks)

b) What are the clinical differential diagnosis of this case? *extragenital* (4 marks)

c) How can you manage this case (Laboratory diagnosis and treatment)? *invest* (4 marks)

3) Examination of one day old full term boy, the right testis was identified while the left one was impalpable even in inguinal canal the rest of examination was normal. *cryptorchid*

a) What is your probable clinical diagnosis? (2 marks)

b) What are the clinical differential diagnosis of such case? (3 marks)

c) What are the complications that can occur? (2 marks)

d) How can you manage this case? *invest* (3 marks)

4) Give an account on:

a) Gonadotoxins. (5 marks)

b) Indications of ultrasonography in male infertility. (5 marks)

5) What are the management of the following (Investigations and treatment):

a) Anogenital wart. *condyloma acuminata* (5 marks each)

b) Lymphogranuloma venereum.

c) Klinefelter syndrome.

d) Arterial impotence. *ED* *Testosterone*

6) Give a short account on the following:

a) Clinical features of acute gonorrhoea in male. (5 marks each)

b) Sertoli cell.

c) Hyperprolactinemia.

d) Sildenafil

Good luck

Andrology Diploma Examination

ALL QUESTIONS SHOULD BE ANSWERED :

1-MCQ (to be answered in a separate answer paper)

(30 marks)

2-Give short account on:

(15 marks)

- a- Female dyspareunia.
- b- Causes of premature ejaculation.
- c- Normal sexual response cycle.

(5 marks)

(5 marks)

(5 marks)

3-A 28years old male patient suffering from primary infertility .His semenogram shows oligoathenoazoospermia.On examination,there was a left sided varicocele.

(10 marks)

- a- What is the prevalence of varicocele in fertile and non-fertile population?
- b- Mention the theories explaining the pathophysiology of varicocele ?
- c- Why varicocele is more common on the left side ?

(1 mark)

(4 marks)

(4 marks)

d- What are the indications of varicolectomy?

(1 mark)

4-Give short account on :

(15 marks)

- a- Secondary stage of syphilis.
- b- Treatment of genital herpes.
- c- Stigmata of early and late congenital syphilis.

(5 marks)

(5 marks)

(5 marks)

5-Compare between :

(15 marks)

- a- Gonococcal and non-gonococcal urethritis.
- b- Trichomonas vaginalis and bacterial vaginosis.
- c- Chancre and chancroid.

(5 marks)

(5 marks)

(5 marks)

6-Give short account on:

(15 marks)

- a- Normal semen parameters.
- b- Cryptorchidism.
- c- Classification of prostatitis.

(5 marks)

(5 marks)

(5 marks)

GOOD LUCK

Answer the following questions:

1- MCQ

30 Marks

2- A 35 years old man Presented with 1 ry infertility for 3 years , his semen profile was azoospermia with normal volume, testosterone, LH, FSH were normal , also testicular size was normal:

A- What is your diagnosis?

2 Marks

B- How can you manage this patient?

8 Marks

3- A 28 years old man Presented with scanty mucoid urethral discharge with history of extramarital intercourse two weeks ago, Gram stained smear for gonococci was-ve:

A- What is your diagnosis?

2 Marks

B- What are the possible causes?

4 Marks

C- How can you treat this patient?

4 Marks

4- Differentiate between: (each one 5 Marks)

A- Testicular torsion and epididymo-orchitis .

~~B~~ Organic and psychogenic ED.

5- Give a short account on: (each one 5 Marks)

A- Causes of aspermia .

~~B~~ KlineFelter syndrome.

~~C~~ Drugs used for intracorporal injection (doses & side effects).

D- Causes of isolated athenozoospermia.

6- Give a short account on: (each one 5 Marks)

A- Stigmata of early and late congenital syphilis .

B- Clinical presentation of granuloma inguinale .

C- Complications of gonococcal infection in males.

D- Treatment of venereal warts .

Good Luck...

Answer the following questions :-

1- MCQ

30 Marks

2- A 45 year old male complained of burning with urination, testicular and low back pain and premature ejaculation (all for the past year). Digital rectal examination revealed slightly enlarged tender prostate:

A- What are your differential diagnosis?

2 Marks

B- How can you confirm the diagnosis?

4 Marks

C- What are the treatments?

4 Marks

3- A 40 year old man Presented with secondary infertility for 6 years. Clinical examination showed bilateral epididymal tail nodules and semen analysis revealed azoospermia with leukocytospermia (past history of recurrent upper urinary tract infections):

2 Marks

A- What is your diagnosis?

4 Marks

B- Expect his hormonal profile.

4 Marks

C- How can you treat this patient?

4- A 27 year old man suffered from mild dysuria, scanty mucoid urethral discharge with history of extramarital intercourse 2 weeks ago, Gram stain smear for gonococci was -ve:

2 Marks

A- What is your diagnosis?

4 Marks

B- What are the possible causes?

4 Marks

C- How can you treat this patient?

5- Give a short account on:

(each one 5 Marks)

A- Medical treatment of erectile dysfunction.

B- Klinefelter syndrome.

C- Treatment of lymphogranuloma venereum.

D- Causes of isolated athenozoospermia.

(each one 5 Marks)

6- Differentiate between:

A- Epidiymo-orchitis and testicular torsion.

B- Psychogenic and organic erectile dysfunction.

(each one 5 Marks)

7- Give a short account on:

A- Recurrent vaginal candidiasis.

B- Treatment of herpes progenitalis.

Good Luck...

Choose the best answer

- 1) The following are theories for the mechanism of varicocele – infertility except:
 - a. Epididymal dysfunction.
 - b. Hormonal disorders.
 - c. Congenital defect.
 - d. Partial obstruction.
 - e. Immunological mechanism.
- 2) Bilateral congenital absence of the vas is associated with the following except:
 - a. low semen volume .
 - b. Acidic semen .
 - c. Delayed liquefaction .
 - d. Azoospermia.
 - e. Absence of fructose in semen
- 3) Chronic prostatitis may be a direct cause for the following sexual disorders:
 - a. Erectile dysfunction.
 - b. Premature ejaculation.
 - c. Dysejaculation .
 - d. b and c .
 - e. a,b and c.
- 4) Low semen volume may be caused by the following except:
 - a. Bilateral and unilateral congenital absence of the vas.
 - b. Partial or complete obstruction of ejaculatory ducts .
 - c. Bilateral complete epididymal obstruction.
 - d. Partial retrograde ejaculation .
 - e. Hypogonadism.
- 5) The complications of testicular biopsy include the following except:
 - a. Orchalgia.
 - b. Hydrocele.
 - c. Hematoma.
 - d. secondary infection.
 - e. Temporary suppression of spermatogenesis.

- 7- Chlamydia trachomatis are responsible for the following diseases except:
- a- Non gonococcal urethritis.
 - b- Inclusion conjunctivitis.
 - c- Psittacosis.
 - d- Lymphogranuloma venerum.
 - e- Endemic trachoma.
- 8- The following STDs may have malignant presentations or sequelae except:
- a- Syphilis.
 - b- Chancroid.
 - c- Lymphogranuloma venerum.
 - d- Condyloma acuminata.
 - e- AIDS
- 9- The following STDs may spread systemically except:
- a- Syphilis.
 - b- Lymphogranuloma venerum.
 - c- Granuloma inguinale.
 - d- Herpes progenitalis.
 - e- Gonorrhea.
- 10- Haemospermia may be caused by the following except:
- a- Blood coagulation defect.
 - b- Hypertension.
 - c- Testicular cancer.
 - d- Seminal vesiculitis.
 - e- Prostatic calculi.
- 11- The highest specificity and sensitivity test for diagnosis of gonorrhea is:
- a- Smear examination.
 - b- Culture of urethral discharge.
 - c- Complement fixation test.
 - d- Genozyme test.
 - e- Direct immunofluorescence test.
- 12- The classic presentation of non gonococcal urethritis is:
- a- Mild urethritis after 3 days incubation period.
 - b- Mild urethritis after 5 days incubation period.
 - c- Severe urethritis after 20 days incubation period.
 - d- Mild urethritis after 20 days incubation period.
 - e- Non of the above.
- 13- Most of the clinically apparent condyloma acuminata are caused by:
- a- HPV 5 and 31.
 - b- HPV 6 and 11.
 - c- HPV 26 and 31.
 - d- HPV 44 and 45.
 - e- HPV 34 and 44.

27- during penile duplex ultrasonography, a normal end diastolic velocity (EDV) during the diastolic phase 20 minutes after ICI is:

- a- < 5 cm/sec.
- b- < 10 cm/sec.
- c- < 15 cm/sec.
- d- < 25 cm/sec.
- e- < 30 cm/sec.

28- Klinefelter patients may have any of the following karyotypes except:

- a- 47xxy.
- b- 48xxxy.
- c- 49xxxy.
- d- 46x0 / 46xy.
- e- 46xy / 47xxy.

A Case:

A 32 yers old man came to the emergency room complaining of painful erection for 3 hours following ICI in a private clinic as a test for potency :

29- You think this patient is having:

- a- Nothing at all .
- b- Prolonged erection .
- c- Priapism .
- d- Satyriasis .
- e- Sex neurosis .

30- The appropriate first step management of such case is:

- a- Reassure the patient that the condition will resolve spontanously with time and discharge him .
- b- Prescribe analgesics and antibiotics .
- c- Prescribe tranquilizers and antiandrogen .
- d- Ask for CBC to exclude sickle cell anemia .
- e- Aspirate and irrigate the corpora cavernosa .

10/08/2010



- 13- A patient with negative ICSI may have one of the following problems except:
- a- Anxiety.
 - b- Advanced neuropathy.
 - c- Venous leak.
 - d- Cavernosal leak.
 - e- Arterial problem.

- 14- Common side effects of seldinafil include the following except:
- a- Headache.
 - b- Flushing and nasal congestion.
 - c- Stomach upset.
 - d- A blue haze at periphery of vision.
 - e- Renal impairment in susceptible patient.

- 15- Treatment of premature ejaculation include the following except:
- a- Intradermal injection of hyaluronic acid.
 - b- Antidepressant.
 - c- Androgen therapy.
 - d- Behavioral therapy utilizing special techniques.
 - e- Topical application of anesthetic.

- 16- Peyronie's disease is primarily a disorder of:
- a- Penile skin.
 - b- Colle's fascia.
 - c- Buck's fascia.
 - d- Tunica albuginea.
 - e- Cavernous tissue.

- 17- Medications that may be used to treat peyronie's disease include the following except:
- a- Vitamin E.
 - b- Colchicine.
 - c- Potaba.
 - d- Dapsone.
 - e- Superoxide dismutase formulations.

- 18- Kartagner's syndrome includes the following except:
- a- Chronic sinusitis.
 - b- Immotile cilia syndrome.
 - c- Globozoospermia.
 - d- Bronchiectasis.
 - e- Situs inversus.

- 19- The development of external genitalia is dependent on:
- a- FSH.
 - b- LH.
 - c- Testosterone.
 - d- Dihydrotestosterone.
 - e- Mullerian inhibitory substance.

10/08/2010

The following are sure causes of azoospermia except:

- a- Varicocele.
- b- Sertoli cell only syndrome.
- c- Classic klinefelter syndrome.
- d- Bilateral congenital absence of the vas deferens.
- e- Bilateral cryptorchidism.

a

7- Hypo-osmotic swelling test used to evaluate:

- a- Sperm chromatin integrity.
- b- Sperm membrane integrity.
- c- DNA content.
- d- Acrosomal integrity.
- e- Mitochondrial function.

8- Klinefelter syndrome is associated with the following except:

- a- Azoospermia.
- b- Small testis.
- c- Testicular cancer.
- d- High FSH and LH.
- e- Osteoporosis.

c

9- Zinc in semen is a marker of:

- a- The testis.
- b- The epididymis.
- c- The seminal vesicles.
- d- The prostate.
- e- All of the above.

d

10- Bilateral congenital absence of the vas is associated with the following except:

- a- Low semen volume.
- b- Acidic semen.
- c- Delayed liquefaction.
- d- Azoospermia.
- e- Absence of fructose in semen.

c

11- The complications of testicular biopsy include the following except:

- a- Orchalgia.
- b- Hydrocele.
- c- Hematoma.
- d- Secondary infection.
- e- Temporary suppression of spermatogenesis.

e

12- Chronic prostatitis may be a direct cause of the following sexual disorders:

- a- Erectile dysfunction.
- b- Premature ejaculation.
- c- Dysejaculation.
- d- b and c.
- e- a, b and c

b

b



Al-Azhar University
Faculty of Medicine
Dermatology & Andrology Department

Master Examination
Andrology 18-5-2014

Answer the following questions :-

1- MCQ (30 Marks)

Choose The Best Answer:

- 1- The first sign of puberty in boys is:
a- Voice changes.
b- Appearance of scanty hair in the mustache area.
c- Appearance of axillary hair. e
d- Enlargement of penile size.
e- Enlargement of testicular size.
- 2- In the ICI test, the degree of erection is estimated on a scale of:
a- E₀ - E₄.
b- E₀ - E₅.
c- E₁ - E₄.
d- E₁ - E₅.
e- Non of the above.
- 3- Fibrosis occurs with intracorporeal injection of papaverine is due to:
a- Over dose.
b- Low dose.
c- Systemic absorption.
d- Acidity of papaverine. e
e- Repeated injections.
- 4- The most common causative organism of acute bacterial prostatitis is:
a- Pseudomonas.
b- Staph. aureus.
c- E. coli. e
d- Anaerobic bacteria.
e- Chlamydia.
- 5- The most common early presentation of hyperprolactinaemia is:
a- Galactorrhea
b- Gynecomastia
c- Erectile dysfunction
d- Inhibited sexual desire
e- Failed puberty.

١٠/٠٨/٢٠١٥



Azhar University
Faculty of Medicine
Dermatology & Andrology Department

Master Examination
STDs May 2014
Date: 15 / 5 / 2014

Answer the following questions :-

1- MCQ

30 Marks

Choose The Best Answer:

- 1- Genital ulcer in chancroid has the following characters except:
a- Multiple.
b- Shallow.
c- Indurated base. C
d- Painful.
e- Bleed on touch.
- 2- Gonorrhea primarily affects the:
a- Squamous epithelium.
b- Transitional epithelium. C
c- Columnar epithelium.
d- All of the above.
e- Non of the above.
- 3- Chlamydia is best cultured on:
a- McCoy cells. a
b- Cycloheximide treated McCoy cells.
c- Yolk sac of chick embryo.
d- Blood agar.
e- Chocolate agar.
- 4- The most common presentation of gonorrhea in females is:
a- Mild soreness of vulva.
b- Dysuria and frequency.
c- Scanty mucopurulent discharge. e
d- Profuse mucopurulent discharge.
e- Asymptomatic.
- 5- The most sensitive test for diagnosis of congenital syphilis is:
a- VDRL.
b- RPR. d
c- Treponema pallidum haemagglutination.
d- Absorbent fluorescence treponema antibody test (IgM).
e- Reiter protein complement fixation test.
- 6- The recommended treatment of condyloma acuminata during pregnancy is:
a- Podophyllin. d
b- Podophyllatoxin.
c- Imiquimod.
d- Cryocautery.
e- Topical 5-fluorouracil.

21- Lymphadenopathy of HIV infection seen in:

- a- The final stage.
- b- Asymptomatic carrier stage.
- c- Symptomatic stage.
- d- The initial infection.
- e- All of the above.

22- All of the following are correct for Buschke – Lowenstein tumour except:

- a- Locally malignant.
- b- Does not metastasise.
- c- Caused by human herpes virus.
- d- Well differentiated.
- e- Has good prognosis.

23- The female patients presented with fishy smelling vaginal discharge. The most accepted diagnosis is:

- a- Vaginal candidiasis.
- b- Chlamydial infection.
- c- Bacterial vaginosis.
- d- Vaginal trichomoniasis.
- e- Early syphilis.

24- The following are complications of chancroid except:

- a- Increase the risk for HIV infection.
- b- Inguinal adenitis.
- c- Phimosis.
- d- Urethral fistula.
- e- Perihepatitis.

25- The drug of choice for the treatment of lymphogranuloma venereum is:

- a- Erythromycin.
- b- Azithromycin.
- c- Tetracycline.
- d- Ceftriaxone.
- e- Penicillin.

26- The tissue reaction to treponema pallidum is:

- a- Cellular infiltration with eosinophils.
- b- Cellular infiltration with plasma cells.
- c- Cellular infiltration with neutrophils.
- d- Non of the above.
- e- All of the above.

27- Prosemen is characterized by the following except:

- a- Scanty drops of mucoid discharge.
- b- Comes out during sexual excitation.
- c- It causes mild burning sensation in the urethra.
- d- Secreted from Cowper and Littre glands.
- e- It lubricates the urethra and neutralizes remnants of acidic urine.

- All of the following are manifestations of disseminated gonorrhea except:
- a- Arthritis.
 - b- Iridocyclitis.
 - c- Papulovesicular skin lesion.
 - d- Erectile dysfunction.
 - e- Endocarditis.

29- "Syphilis d'emblee" describes syphilis occurring among:

- a- Homosexual.
- b- Those practicing orogenital sex.
- c- Those infected through blood transfusion.
- d- Bisexual.
- e- Heterosexual.

30- A Case:

A single 23 years old man complaining occasional urethral discharge usual after urination, defecation or straining (he denies any sexual relation), urethral swab for gram stain and culture were negative. This discharge most probably is

- a- Prostatitis due to sexual excitement.
- b- Chlamydial urethritis.
- c- Gonorrhea.
- d- Physiological prostaticorrhoea due to sexual congestion.
- e- Premature ejaculation.

- 21- Lymphadenopathy of HIV infection seen in:
a- The final stage.
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- 25- The drug of choice for the treatment of lymphogranuloma venereum is:
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b- Azithromycin.
c- Tetracycline.
d- Ceftriaxone.
e- Penicillin.
- 26- The tissue reaction to treponema pallidum is:
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- d- Bronchiectasis.
- ☒ e- Situs inversus.

19- The development of external genitalia is dependent on:

- a- FSH.
- ☒ b- LH.

- "Indolent bubo" of chancre describes inguinal lymphnodes that are:
- a- Bilaterally enlarged, discrete, painful and rubbery.
 - b- Bilaterally enlarged, discrete, painless and rubbery.
 - c- Bilaterally enlarged, matted, painful and hard.
 - d- Bilaterally enlarged, matted, painless and hard.
 - e- Bilaterally enlarged, discrete painless and hard.

15- Which of the following is not an "opportunistic infection"?

- a- Pneumocystis carinii.
- b- Oral thrush.
- c- Lymphogranuloma venereum.
- d- Genital herpes.
- e- Mycobacterium avium-intracellulare.

16- Reiter's disease is a syndrome of the following except:

- a- Non gonococcal urethritis
- b- Orogenital ulcers
- c- Polyarthrits
- d- Conjunctivitis or iritis
- e- Uveitis.

17- "Groove sign" means that the inguinal ligament separates the enlarged lymphnode below and above. It is seen in:

- a- Syphilis.
- b- Lymphogranuloma venereum.
- c- Chlamydial urethritis.
- d- Granuloma inguinale.
- e- Acute epididymorchitis.

18- The following are manifestations of pelvic inflammatory disease except:

- a- Fever.
- b- Lower abdominal pain and tenderness.
- c- Vaginal ulcerations.
- d- Deep dyspareunia.
- e- Abnormal vaginal discharge and odour.

19- Nisseria gonorrhea can produce acid from:

- a- Glucose only.
- b- Glucose and sucrose.
- c- Lactose only.
- d- Lactose and glucose.
- e- All of the above.

20- The most common sexually transmitted pathogen causing epididymitis is:

- a- Nisseria gonorrhea.
- b- Chlamydia trachomatis.
- c- Herpes simplex virus.
- d- Treponema pallidum.

١٤/٠٩/٢٠١٥

تم النسخ إلى الحافظة

Answer the following questions :-

1- MCQ

30 Marks

Choose The Best Answer:

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 - d- Absorbent fluorescence treponema antibody test (IgM).
 - e- Reiter protein complement fixation test.
- 6- The recommended treatment of condyloma acuminata during pregnancy is:
 - a- Podophyllin.
 - b- Podophyllatoxin.
 - c- Imiquimod.
 - d- Cryocautery.
 - e- Topical 5-fluorouracil.

- during penile duplex ultrasonography, a normal end diastolic velocity during the diastolic phase 20 minutes after ICI is:

- a- ☒ < 5 cm/sec.
- b- < 10 cm/sec.
- c- < 15 cm/sec.
- d- < 25 cm/sec.
- e- < 30 cm/sec.

- Klinefelter patients may have any of the following karyotypes except:

- a- $47xxy$.
- b- $48xxxy$.
- c- $49xxxy$.
- ☒ d- $46x0 / 46xy$.
- e- $46xy / 47xxy$.

A Case:

A 32 yers old man came to the emergency room complaining o painful erection for 3 hours following ICI in a private clinic as a test fo potency :

- You think this patient is having:

- a- Nothing at all .
- ☒ b- Prolonged erection .
- c- Priapism .
- d- Satyriasis .
- e- Sex neurosis .

- The appropriate first step management of such case is:

- a- Reassure the patient that the condition will resolve spontanously with time and discharge him .
- ☒ b- Prescribe analgesics and antibiotics .
- c- Prescribe tranquilizers and antiandrogen .
- d- Ask for CBC to exclude sickle cell anemia .
- ☒ e- Aspirate and irrigate the corpora cavernosa .

12/09/2010

All questions should be answered:

1) MCQs (To be answered in a separate answer sheet) (30 marks)

2) Define and give an example for each of the following: (10 marks)

- a. Acanthosis.
- b. Psoriasiform pattern.
- c. Dyskeratosis.
- d. Hydropic degeneration.
- e. Grenz zone.

(2 marks each)

3) Give short account on:

- a. Tzanck smear and its application in dermatology.
- b. Skin diseases caused by Corynebacteria.

(16 marks)

(8 marks)

(8 marks)

4) Describe the histopathological difference between: (18 marks)

(6 marks)

- a. Pemphigus vulgaris and bullous pemphigoid.

(6 marks)

- b. Tuberculoid and lepromatous leprosy.

(6 marks)

(6 marks)

All questions should be answered:

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(6 marks)

b. Tuberculoid and lepromatous leprosy.

(6 marks)

(6 marks)

All questions should be answered (Time allowed: 3 hours):

1- MCQ (To be answered in a separated sheet) (30 marks)

2- Male patient 38 years old complaining of scrotal pain with 2ry infertility for 5 years. Examination revealed bilateral palpable veins through the scrotal skin.

- A- What is your diagnosis? (5 marks)
- B- What are the investigations needed? (5 marks)
- C- How can you treat such patient? (5 marks)

3- A 33 years old man presented by a single painless penile ulcer since 10 days with history of extramarital sexual relation 45 days ago. On examination, the ulcer has slopping edge and indurated base with bilateral enlarged, discrete, firm and painless inguinal lymph nodes.

- A- What is your diagnosis? (5 marks)
- B- What are the clinical differential diagnosis? (5marks)
- C- How can you treat such patient? (5marks)

4- Discuss endocrinal causes of erectile dysfunction and their management.

(10 marks)

5- Give an account on:

(each one 5 marks)

- A- Herpes progenitalis.
- B- Genital warts.
- C- Non gonococcal urethritis.

6- Give a short account on:

(each one 5 marks)

- A- Effect of syphilis on pregnancy outcome.
- B- Sildenafil citrate therapy.
- C- Possible causes of bilateral empty scrotum.

Good Luck

All questions should be answered (Time allowed: 3 hours):

(30 marks)

1- MCQ (To be answered in a separated sheet)

2- A 37 years old man presented with 2ry infertility for 6 years. Clinical examination showed bilateral epididymal tail nodules and semen analysis was azoospermia with normal volume and leukocytospermia. There was history of recurrent urinary tract infections:

A- What is your diagnosis? *Bilateral epididymitis*

(2 marks)

B- Mention his hormonal profile. *normal*

(4 marks)

C- How can you treat this patient?

(4 marks)

3- A 25 years old man suffered from mild dysuria and mucoid urethral discharge. There is history of extramarital intercourse 3 weeks ago. Gram stained smear was negative:

A- What is your diagnosis?

(2 marks)

B- What are the possible causes?

(4 marks)

C- How can you treat such patient? *1st, 2nd*

(4 marks)

4- A single 23 years old male complaining occasional urethral discharge that may follow urination, defecation and sometimes on straining. He denies any sexual relation. urethral swab for Gram stain for gonococci was -ve: *urethritis*

A- What is your diagnosis?

(5 marks)

B- What is the cause and management? *Staphylococcus*

(5 marks)

5- Differentiate between:

(each one 5 marks)

A- Epididymo-orchitis and testicular torsion.

B- Psychogenic and organic erectile dysfunction.

C- Candidal and Trichomonas Vaginal discharge.

D- Condylomata lata and condylomata acuminata.

6- Give a short account on:

(each one 5 marks)

A- Blood supply and lymphatic drainage of testis.

B- Pediatric vaginal discharge.

C- Oral manifestations of syphilis.

D- Ocular manifestations of HIV/AIDS.

Good Luck

the following questions:

be answered in special sheet

(30 marks)

A 40-year-old male had an extramarital sexual relationship. One month later, he developed urethral discharge.

What is your diagnosis and differential diagnosis of such condition? How to manage such condition?

Give an account on genital ulcers as regards:

Differential diagnosis.

Management (Investigations & treatment).

Answer ALL the following questions:

1) MCQ (To be answered in a separate answer sheet) (30 marks)

2) Differential diagnosis of genital ulcers. (15 marks)

3) An adult male 25 years old presented to emergency room with painful erection for more than 6 hours without sexual stimulation. (10 marks)

- a) Mention the possible causes of this condition.
- b) Treatment and complications.

4) Give an account on: (15 marks)

- a) Management of anogenital warts in children. (5 marks)
- b) Suppressive therapy for genital herpes. (5 marks)
- c) Side effects of Sildenafil. (5 marks)

5) Give an account on: (15 marks)

- a) Candidal vaginitis and bacterial vaginosis (compare). (5 marks)
- b) HPV vaccine. (5 marks)
- c) How does varicocele affect fertility? (5 marks)

6) Give a short account on: (15 marks)

- a) Structure of sperm tail. (5 marks)
- b) Methods of sperm retrieval for ICSI. (5 marks)
- c) Drug resistant gonorrhea. (5 marks)

Good luck

ت خاصة بامتحان المقالة

جاية بالقلم الأزرق والتخطيط والتسطير بالقلم الرصاص
نوع الإجابة من الجهة اليمنى إلى الجهة اليسرى في كراسة الإجابة
نوع وضع أى علامات باللغة العربية في الكراسة
نوع كتابة أى بيانات في كراسة الإجابة خارج المكان المخصص لذلك
موج للطلاب بكراصة إجابة واحدة
نوع تواجد المحمول داخل لجان الامتحان
حالة عدم الالتزام يلغى الامتحان دون أدنى مسؤولية

Handwritten notes and diagrams:

- Chlamydia, Gonorrhea, Syphilis, HIV, etc.
- Genital ulcers: Chancroid, Syphilis, Herpes, etc.
- Management of anogenital warts: Cryotherapy, Topical treatments, etc.
- Suppressive therapy for genital herpes: Acyclovir, Valacyclovir, etc.
- Side effects of Sildenafil: Headache, flushing, etc.
- Structure of sperm tail: Head, Midpiece, Tail.
- Methods of sperm retrieval for ICSI: Epididymal sperm aspiration, etc.
- Drug resistant gonorrhea: Cephalosporins, Fluoroquinolones, etc.



Al-Azhar University

Degree: Diploma

Departments of Dermatology and Venereology

Time: 2 hours

Faculty of Medicine

Course title: Andrology and STDs

Date: April 11th, 2017

Total marks: 100 marks

Answer ALL the following questions:

1) MCQs (To be answered in a separate answer sheet) (30 marks)

2) Discuss causes, diagnosis and treatment of non gonococcal urethritis? (15 marks)

3) An adult male 30 years old presented with rapid ejaculation few seconds after penetration.

a) Mention the possible causes of this condition. (5 marks)

b) Treatment and complications. (5 marks)

4) Give a short account on: (15 marks)

a) Management of anogenital warts in pregnancy. (3 marks)

b) Diagnosis and treatment of testicular torsion. (7 marks)

c) Diagnosis of micropenia. (5 marks)

5) Discuss (5 marks for each):

a) Obstructive and non obstructive azoospermia (compare).

b) Clinical picture of disseminated gonorrhea.

c) Mechanism of action and complications of phosphodiesterase inhibitors.

6) Give a short account on: (5 marks for each)

a) Interpretation of penile duplex. (5 marks)

b) Structure and functions of sertoli cells. (5 marks)

c) Stigmata of congenital syphilis. (5 marks)

Good luck

تمنيات طيبة لطلابنا الحاضرين

1. الإجابة باسم الإزدق والتسليم والتسليم. وأقام في مصر
2. مشروع الأبحاث من الجهة الطبية إلى الجهة السريرية في كراسة الإجابة
3. مشروع وضع أي علامات باللغة العربية في كراسة الإجابة
4. مشروع كتابة أي فوائد في كراسة الإجابة معراج العنكبوت المتخصص في ذلك
5. مشروع الملحق بكراسة الإجابة وأجابه
6. مشروع أو كراسة السؤال. تأمل لكل إجابة الإجابة
7. في حالة عدم الإجابة على أي سؤال من الأسئلة أعلاه

Answer all the following questions:

- 1-MCQ: الإجابة في كراسة الإجابة 30 Mark
- 2-A 30years old male had an extramarital relation after 5 day he is coming complaining from urethral discharge
- A-What is your diagnosis? D.D. 4 Mark
- B-How to manage such case (investigation and treatment)? 14 Mark
- 3-Give short account on:-
- A- Causes of female vaginal discharge 12 Mark
- B- High risk groups of genital warts 12 Mark
- 4- Give short account on:-
- A-Causative organism of granuloma inguinal and its treatment 12 Mark
- B-Treatment of herpes progenitalis 12 Mark
- 5- Give short account on:-
- A-Clinical stages of HIV infection 12 Mar
- B-Treatment of secondary stage of syphilis 12 Mar
- 6- Give short account on:-
- A-Parasitic sexually transmitted diseases 12 Mar
- B-Treatment of NGU 12 Mar

GOOD LUCK

Paper II

Answer ALL the following questions:

1- MCQs (To be answered in a separated sheet)

(30 marks)

2- A 53 y old female complained from sudden onset of annular erythematous cellulitis like swelling in the right forearm of 3 weeks duration, the lesion is painful and not warm, after a few days the lesion is replaced by greenish blue induration .

A- What is the most likely diagnosis?

(3 marks)

B- How can you confirm the diagnosis?

(10 marks)

C- What is the the treatment of this case?

(7 marks)

3- Write indications, mode of action, side effects and dosage of the following drugs (5 marks each)

A- Methotrexate.

B- Acitretin.

C- Cyclosporin A.

D- Itraconazole.

E- Dapsone.

4- Enumerate skin diseases associated with gastrointestinal manifestations (13 marks)

5- Give a short account on the following:

(6 marks each)

✓ A- Acne fulminans.

✓ B- Hyperimmunoglobulin E syndrome

✓ C- Ectodermal dysplasia

✓ D- Purpura annulare telangiectoids

✓ E- Paraneoplastic pemphigus.

6- Compare between (clinical, histopathological, treatment): (8 marks each)

✓ A- IgA pemphigus *versus* Linear IgA bullous dermatosis

B- TEN *versus* SSSS disease

✓ C- Genital LSEA in male *versus* female

✓ D- Lichen planus pemphigoid *versus* bullous lichen planus

Good Luck

Paper I

Answer ALL the following questions:

- 1- A 9 y old boy complains from asymptomatic hypopigmented patches affecting the trunk, buttocks and limbs of 1 year duration. The patient received many topical therapy without benefit.
 - A- What is the most likely diagnosis? (3 marks)
 - B- What is the differential diagnosis? (10 marks)
 - C- How can you confirm the diagnosis? (10 marks)
 - D- How can you treat this case? (7 marks)
- 2- Give a short account on:
 - A- Lichen planus pigmentosus (5 marks each)
 - B- Gram negative folliculitis
 - C- Kaposi sarcoma in HIV
 - D- Histoid leprosy
- 3- Bowen's disease is a squamous cell carcinoma in situ
Give an account on etiology, clinical picture and treatment. (15 marks)
- 4- Compare histopathologically between: (8 marks each)
 - A- Necrobiosis lipodica *versus* granuloma annulare.
 - B- Plaque mycosis fungoides *versus* subacute dermatitis.
 - C- Acute generalized exanthematous pustulosis (AGEP) *versus* pustular psoriasis.
 - D- Basal cell carcinoma *versus* trichoepithelioma.
- 5- What are the causes, differential diagnosis and management of chronic leg ulcers? (18 marks)
- 6- The followings are manifestation of certain syndromes. Complete the other features and the name of the syndromes (7 marks each)
 - A- Leish nodule
 - B- Angioid streaks
 - C- Yellow beaded papules on the eye lids
 - D- Ash leaf hypopigmentation
 - E- Keratoderma blenorrhagica

Good Luck



Al-Azhar University

Degree: Master

Departments of Dermatology and Venereology

Time: 3 hours

Faculties of Medicine

Course title: Andrology

Date: November 24, 2020

Total marks: 150 marks

Answer ALL the following questions:

1. MCQs: to be answered in special sheet

(30 marks)

2. A 27 years married male complained of having recurrent attacks of premature ejaculation.

- What is the most common cause(s) of such condition?
- How to manage such condition?

3. Give short account on XX male syndrome as regards:

- Manifestation of this syndrome.
- Relation of this syndrome to infertility.

4. Define :

- Delayed puberty in males.
- How to manage this condition in males?

5. Give short account on Sertoli cell as regards:

- Function of Sertoli cell.
- Sertoli cell only syndrome & its management (investigations & treatment)

(14 marks)

6. Male dyspareunia is a sexual problem of some males:

- Define this condition & give short account on its causes.
- How to manage such condition (investigations & treatment)?

Good Luck

بامتحان المقاله:
والتسطير بقلم رصاص.
الجهة اليمنى الى الجهة اليسرى في كراسة الاجابه.
علامات باللغة العربيه في الكراسه
بيانات في كراسة الاجابه خارج المكان المخصص لذلك.
بكراسة اجابه واحده.
المحمول داخل لجان الامتحان.
لالتزام يلغي الامتحان دون ادنى مسئوليه.



sity

Faculties of Medicine
Course title: Sexually

Dermatology and Venereology

Date: November 21,
Total marks: 150 ma

the following questions:
be answered in special sheet

(30 marks)

A 50-year-old male had an extramarital sexual relationship. One month later, he developed urethral discharge.
What is your diagnosis and differential diagnosis of such condition?
How to manage such condition?

Account on genital ulcers as regards:

Differential diagnosis.

Management (Investigations & treatment).

Account on:

Manifestations of secondary stage of syphilis.

Management of secondary stage of syphilis (Investigations & treatment).

Account on human papilloma virus (HPV) as regards:

Vaccine against this virus.

Management of HPV (Investigations & treatment).

Account on lymphogranuloma venereum as regards:

Buboes and groove sign.

Management of such condition (Investigations & treatment).

Good Luck



Al-Azhar University

Degree: Diploma

Departments of Dermatology and Venereology

Time: 2 hours

Faculty of Medicine

Course title: Andrology and STDs

Date: April 11th, 2017

Total marks: 100 marks

Answer ALL the following questions:

1) MCQs (To be answered in a separate answer sheet) (30 marks)

2) Discuss causes, diagnosis and treatment of non gonococcal urethritis? (15 marks)

3) An adult male 30 years old presented with rapid ejaculation few seconds after penetration.

a) Mention the possible causes of this condition. (5 marks)

b) Treatment and complications. (5 marks)

4) Give a short account on: (15 marks)

a) Management of anogenital warts in pregnancy. (3 marks)

b) Diagnosis and treatment of testicular torsion. (7 marks)

c) Diagnosis of micropenia. (5 marks)

5) Discuss (5 marks for each):

a) Obstructive and non obstructive azoospermia (compare).

b) Clinical picture of disseminated gonorrhea.

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a) Interpretation of penile duplex. (5 marks)

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Good luck

تمنيات طيبة لطلابنا الحاضرين

1. الإجابة باسم الإزدق والتسليم والتسليم. وأتمنى أن يكون
2. مجموع الإجابة من الجهة العلوية إلى الجهة السفلية في كل مرة الإجابة
3. مجموع الإجابة من الجهة العلوية إلى الجهة السفلية في كل مرة الإجابة
4. مجموع الإجابة من الجهة العلوية إلى الجهة السفلية في كل مرة الإجابة
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6. مجموع الإجابة من الجهة العلوية إلى الجهة السفلية في كل مرة الإجابة
7. في حالة عدم الإجابة على السؤال، فإن الإجابة تكون الإجابة

Answer all the following questions:

- 1-MCQ: الإجابة في كراسة الإجابة 30 Mark
- 2-A 30years old male had an extramarital relation after 5 day he is coming complaining from urethral discharge
- A-What is your diagnosis? D.D. 4 Mark
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- A-Parasitic sexually transmitted diseases 12 Mar
- B-Treatment of NGU 12 Mar

GOOD LUCK



Al-Azhar University
Degree: Master
Departments of Dermatology and Venereology
Time: 3 hours

Faculties of Medicine
Course title: Andrology
Date: April 24, 2017
Total marks: 150 marks

Answer ALL the following questions:

1. MCQs (الاجابة في كراسة الاجابة)

(30 marks)

2-A 45 years old male suffering from penile pain especially during erection

A-What is your possible diagnosis?

B- How to manage this case (investigations and treatment)?

(4 marks)

(20 Marks)

3-Give short account on:-

A- Transsexual *versus* Transgender

B- True hermaphroditism.

(12 marks)

(12 marks)

4- Give short account on:-

A-Ejaculatory Pain

B- Hematospermia

(12 marks)

(12 marks)

5- Give short account on:-

A-Non sperm cells in semen

B-Female sexual arousal disorders

(10 marks)

(10 marks)

6- Give short account on:-

A-Micropenis

B-Sensate focus programs

GOOD LUCK